

STATE OF NEW HAMPSHIRE

Statement of Receipts and Expenditures for POLITICAL COMMITTEES .
(RSA 664)
September 12, 2006 - Primary Election

Charles F. Wore	Chairperson, and I,	Robert L. Nash
Treasurer of theIndependen	nt Ins. Agents & Brokers o	(pnn:name) f NH Political Action
Committee, located at 125 Ai	irnort Poad Compand N	
report that the Committee has receip	ots or expenditures exceeding \$500 for the	primary election and do submit the
following report of receipts and expe		
SUMMARY OF RECEIPT Date of Report: *June 21	TS AND EXPENDITURES FOR □ August 23 □ Sept	PRIMARY ELECTION Tember 6 September 20
Receipts:		Forward +3018.50
1) Total of all receipts in this report		1) \$ -0-
2) Total of all receipts in previous reg3) Total of all primary election receip (Add lines 1 and 2)		2) \$\frac{5150.00}{5150.00}
Expenditures: 4) Total expenditures in this report 5) Total of expenditures in previous r 6) Total of all primary election expenditures.	NEW HAMPSHIRE eports SECRETARY OF STATE	4) \$ <u>100.00</u> 5) \$ <u>5100.00</u> 6) \$ <u>5200.00</u>
7) Balance if SURPLUS		7) \$÷2968.50
8) Balance if DEFICIT		8) \$
X Charle of Chairman	Catr Roll Signatur	e of Treasurer

Secretary of State's Office, State House, Room 204, Concord, New Hampshire 03301 Phone: 603-271-3242 - Fax: 603-271-6316 - http://www.sos.nh.gov email: elections@sos.state.nh.us

^{*}This report not required by Political Committee of a Political Party or by a Political Committee of a Candidate. RSA 664:6

PRIMARY ELECTION ITEMIZED RECEIPTS Full Name of Contributor Post Office Address					Reporting Period endingSept. 6,			
(Alphabetical Order)	Post Office Address	Amount of Contribution	Date Received	Aggregate* Contributions to Date	If o	outribution or a ever \$100 list:	ggregate contribution Place of Business	
·								
						:		
tal of receipts unitemized	d (\$25 or under) in this report \$_							
RIMARY ELECTION	NITEMIZED EXPENDITOR	IES		*** Indicate to				
RIMARY ELECTION	d (\$25 or under) in this report \$	SES Amount of Expense	Date of Expense	*** Indicate to ***Primary/0	o which ele Beneral N		ure applies	
RIMARY ELECTION d to Whom Velch For	NITEMIZED EXPENDITOR	Amount of Expense	Expense	*** Indicate to ***Primary/G	o which ele General N	ction expendit ature of Expend	ure applies	
RIMARY ELECTION Id to Whom Welch For Representative	Post Office Address 100 School St. Concord, NH	Amount of Expense	Expense 8/29/06	*** Indicate to ***Primary/G	o which ele	ature of Expendit	ure applies iture	
RIMARY ELECTION Id to Whom Welch For Representative	Post Office Address 100 School St. Concord, NH 03301	Amount of Expense	Expense 8/29/06	*** Indicate to ***Primary/0	o which ele	ature of Expend	ure applies iture n	
RIMARY ELECTION id to Whom Welch For Representative	Post Office Address 100 School St. Concord, NH 03301	Amount of Expense	Expense 8/29/06	*** Indicate to ***Primary/G	o which ele	ature of Expendit	ure applies iture n	

TOTAL P.02